

## (1) PLACE OF BIRTH

County of CharlottesvilleTownship of .....Inc. Town of .....City of .....

## CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA

Bureau of Vital Statistics

State Board of Health

Registration District No. 129.1Registered No. .....

(For use of Board of Health)

(No. ....)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Brian Thomas

(If child is not yet named, give name of child at birth)

(3) Sex Male(4) Type or Weight -(5) Number in order of birth -(6) Is child born alive or stillborn? Yes(7) Date of birth July 3, 1943

## FATHER.

(8) Full Name Wieland Thomas(9) Present Residence of Father Charlottesville(10) Color Col. (11) Age at last birthday 24(12) Birthplace S.C.(13) Occupation Under Service(14) Number of children born to mother, including present birth 2

## MOTHER.

(14) Name before marriage Lena Gore(15) Present Residence of Mother Charlottesville(16) Color Col. (17) Age at last birthday 25(18) Birthplace S.C.(19) Occupation domestic(20) Number of children of this mother now living, including present birth 2

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE.

(21) I hereby certify that I attended the birth of this child, who was Brian Thomas on the date above stated. (Born alive or stillborn) (Year & M. or P. M.)(22) (Signature) Lena Gore(23) State whether Physician or Midwife Midwife(24) Address of Physician or Midwife Charlottesville

Given name added from a supplementary report

(25) Witness (Signature of Witness necessary only when question 21 is signed)

(26) Date Aug. 10, 1943 (27) (Signature) E. L. Early

When there was no attending physician or midwife, then the father, householder, etc., should make the report. If a child breathes even once, it must not be reported as stillborn. No report is desired of a stillborn child before the fifth month of pregnancy.